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DATE: APRIL 5, 2005

NUMBER OF PAGES (INCLUDING  
THIS TRANSMITTAL COVER SHEET): 5

TIME:

OUR REFERENCE: 214453

FROM: CHRISTOPHER T. GRIFFITH  
REGISTRATION NO. 33,392

TO: EXAMINER MONIQUE R. JACKSON  
GROUP 1773  
MAIL STOP RCE  
COMMISSIONER FOR PATENTS  
P.O. BOX 1450  
ALEXANDRIA, VA 22313-1450

TELEPHONE NUMBER: 571-272-1508  
FACSIMILE NUMBER: 703-872-9306

IN RE APPLN. OF: CHAWLA ET AL.  
APPLICATION NO. 10/008,489  
FILED: NOVEMBER 13, 2001  
FOR: RADIATION-CURABLE COMPOSITIONS FOR OPTICAL MEDIA  
GROUP ART UNIT: 1773  
EXAMINER: MONIQUE R. JACKSON

A REQUEST FOR CONTINUED EXAMINATION (RCE) IS ATTACHED IN RESPONSE TO THE  
ADVISORY ACTION DATED MARCH 10, 2005.

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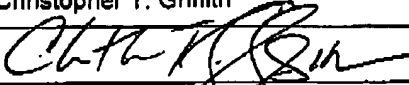
<b>REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL</b>  Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application No.	10/008,489
	Filing Date	November 13, 2001
	First Named Inventor	CHAWLA, Chander P.
	Group Art Unit	1773
	Examiner Name	Monique R. Jackson
	Attorney Docket No	214453


This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

<b>1. Submission required under 37 CFR 1.114</b> a. <input checked="" type="checkbox"/> Previously submitted i. <input checked="" type="checkbox"/> Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on February 17, 2005 (Any unentered amendment(s) referred to above will be entered.) ii. <input type="checkbox"/> Consider the arguments in the Appeal Brief or Reply Brief previously filed on iii. <input type="checkbox"/> Other: b. <input type="checkbox"/> Enclosed i. <input type="checkbox"/> Amendment/Reply ii. <input type="checkbox"/> Affidavit(s)/Declaration(s) iii. <input type="checkbox"/> Information Disclosure Statement (IDS) iv. <input type="checkbox"/> Form PTO-1449 v. <input type="checkbox"/> Copies of References listed in Form PTO-1449 (except for U.S. patents and applications) vi. <input type="checkbox"/> Other:									
<b>2. Miscellaneous</b> a. <input type="checkbox"/> Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; fee under 37 CFR 1.17(i) required.) b. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 c. <input type="checkbox"/> Other:									
<b>3. Fees</b> The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. a. <input checked="" type="checkbox"/> Please charge Deposit Account No. 12-1216 in the total amount indicated below. A duplicate copy of this transmittal sheet is enclosed herewith. i. <input checked="" type="checkbox"/> RCE fee of \$790.00 (large entity) required under 37 CFR 1.17(e) ii. <input checked="" type="checkbox"/> Two-month extension of time fee of \$450.00 (37 CFR 1.138 and 1.17) iii. <input checked="" type="checkbox"/> Petition for an extension of time (including the period noted above, if checked), as well as for any additional period necessary to render the present submission timely. Please charge Deposit Account No. 12-1216 for the appropriate petition fee. iv. <input type="checkbox"/> Suspension of action fee of \$130.00 (37 CFR 1.17(i)) v. <input type="checkbox"/> Other: vi. <input type="checkbox"/> Claim fee								\$790.00 \$450.00	
CLAIM FEE	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	EXTRA CLAIMS PRESENT	RATE	ADD'L CLAIM FEE	RATE	ADD'L CLAIM FEE	
TOTAL	55	MINUS	65	=	x 25=	\$	x 50=	\$	
INDEPENDENT	3	MINUS	3	=	x 100=	\$	x 200=	\$	
<input type="checkbox"/>	FIRST PRESENTATION OF MULTIPLE CLAIM					+ 180=	\$	+ 380=	\$
Claim fee total									
<b>Total amount to be charged to Deposit Account</b>								<b>\$1240.00</b>	
b. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any deficiencies in the above fees or to credit any overpayments to Deposit Account No. 12-1216									

Page 1 of 2

In re Application of CHAWLA et al.  
Application No. 10/008,489

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED			
Name (Print/Type)	Christopher T. Griffith	Registration No. (Attorney/Agent)	33,392
Signature		Date	April 5, 2005
Address	Leydig, Volt & Mayer, Ltd. Two Prudential Plaza, Suite 4900 180 North Stetson Avenue Chicago, Illinois 60601-6780	Phone	(312) 616-5600 (telephone) (312) 616-5700 (facsimile)

CERTIFICATE OF MAILING OR TRANSMISSION UNDER 37 CFR 1.8			
I hereby certify that this RCE Transmittal and any accompanying documents is, on the date indicated below, <input type="checkbox"/> being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop RCE Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or <input checked="" type="checkbox"/> being facsimile transmitted to the U.S. Patent and Trademark Office at facsimile number (703) 872-9308.			
Name (Print/Type)	Monica Vernetta Gray		
Signature		Date	April 5, 2005

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RCE Transmittal (Revised 3/1/05)

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	First Named Inventor	CHAWLA, Chander P.
	Group Art Unit	1773
	Examiner Name	Monique R. Jackson
	Attorney Docket No	214453

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(Any unentered amendment(s) referred to above will be entered.)

ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on

iii. ☐ Other:

b. ☐ Enclosed

i. ☐ Amendment/Reply

ii. ☐ Affidavit(s)/Declaration(s)

iii. ☐ Information Disclosure Statement (IDS)

iv. ☐ Form PTO-1449

v. ☐ Copies of References listed in Form PTO-1449  
(except for U.S. patents and applications)

vi. ☐ Other:

**2. Miscellaneous**

a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; fee under 37 CFR 1.17(i) required.)

b. ☐ Applicant claims small entity status. See 37 CFR 1.27.

c. ☐ Other:

**3. Fees** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

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ii. ☒ Two-month extension of time fee of \$450.00 (37 CFR 1.136 and 1.17) \$450.00

iii. ☒ Petition for an extension of time (including the period noted above, if checked), as well as for any additional period necessary to render the present submission timely. Please charge Deposit Account No. 12-1216 for the appropriate petition fee.

iv. ☐ Suspension of action fee of \$130.00 (37 CFR 1.17(i))


v. ☐ Other:

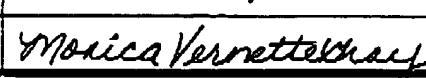
vi. ☐ Claim fee

CLAIM FEE	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	EXTRA CLAIMS PRESENT	RATE	ADD'L CLAIM FEE	RATE	ADD'L CLAIM FEE	
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Claim fee total									
<b>Total amount to be charged to Deposit Account</b>								<b>\$1240.00</b>	

b. ☒ The Commissioner is hereby authorized to charge any deficiencies in the above fees or to credit any overpayments to Deposit Account No. 12-1216

In re Application of CHAWLA et al.  
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SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED			
Name (Print/Type)	Christopher T. Griffith	Registration No. (Attorney/Agent)	33,392
Signature		Date	April 5, 2005
Address	Leydig, Voit & Mayer, Ltd. Two Prudential Plaza, Suite 4900 180 North Stetson Avenue Chicago, Illinois 60601-6780	Phone	(312) 616-5600 (telephone) (312) 616-5700 (facsimile)

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Name (Print/Type)	Monica Vernet Gray		
Signature		Date	April 5, 2005

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RCE Transmittal (Revised 3/1/05)

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